



Date received: _____

APPLICATION TO APPLY FOR A SURFSIDE BOARD OR COMMITTEE

Name: _____

Address: _____

Town: _____ Zip: _____

Phone: Home _____ Cell _____ Work _____

Surfside Resident Since: _____

Occupation or Business Affiliation: _____

Email: _____

Are you a qualified elector of Miami-Dade County? Yes No

Applying for:

_____ Planning and Zoning & Design Review Board

_____ Personnel Appeals Board

_____ Parks and Recreation Committee

_____ Tourist Board

_____ Downtown Vision Advisory Committee (Town Manager's Committee)

_____ Sustainability Sub Committee to the Planning and Zoning Board

_____ Pension Board

_____ Police Pension Board

Tell us about yourself.

Education and/or Profession: _____

Current Organization Memberships: _____

Surfside Boards/Committees on which you have served: _____

Specific Interests: _____

What personal qualifications can you bring to this board or committee? _____

Why do you wish to serve on this board/committee? _____

Applicant's Signature

Date

Note: This application is information of public record in accordance with Florida Sunshine Law. Appointment to any of the boards and committees is a voluntary service. Public service opportunities offered by the Town of Surfside do not discriminate on the basis of race, color, national origin, sex, religion, age, political affiliation, marital status, sexual orientation and disabled status.

PLEASE FILL OUT AND RETURN THIS APPLICATION TO THE OFFICE OF TOWN CLERK FOR PROCESSING AT SNOVOA@TOWNOFSURFSIDEFL.GOV.

TOWN OF SURFSIDE, 9293 HARDING AVENUE, SURFSIDE, FLORIDA 33154 305-861-4863 EXT. 226

12-2018